Cleaning Peripherally Inserted Central Catheters

**Problem**

The majority of patients admitted to the hospital will likely require some type of intravenous access. Caring for a peripherally inserted central catheter (PICC) requires appropriate technique and attention to process to prevent complications such as infection or dislodgement.

**Consequence**

Failure to correctly clean and maintain the PICC site will increase risk of infection and complications for patients, and reduce catheter patency over an extended period of time.

**Solution**

Here are some suggestions on what to watch for and how to avoid PICC problems.

- PICC line dressings should be changed at least weekly, when not being used routinely, and more often, if used frequently.
- The insertion site must be assessed within the first 24 to 48 hours to determine whether any bleeding or drainage has occurred.
- The dressing needs to be clean and dry to minimize the risk of infection.
- The dressing should be changed at any time if it is moist, bloody or loose.
- It is very important to note the length of the catheter from the insertion site to the end to make sure the catheter is still in its original place.
- The common PICC dressing procedure includes the following steps:
  - Explain the procedure to the patient
  - Wash your hands
  - Prepare patient’s arm for dressing change
  - Remove old dressing from the bottom of the dressing upward
  - Assess catheter site for redness, swelling and drainage
- Wash hands and prepare dressing
- Use sterile gloves (powder free)
- If blood or drainage is present, clean the catheter exit site with the required agent and the skin using concentric circles away from the puncture site
- Allow cleaning agent to dry before applying the bandage.

- The purpose of the dressing is to control bleeding, prevent infection, absorb blood and wound drainage, and protect the wound from further injury.

References

Avoiding Common Nursing Errors, Lisa Marcucci, MD, Editor, Lippincott Williams and Wilkins, 2010